



AARP Tennessee  
150 4th Avenue North  
Suite 180  
Nashville, TN 37219

T 1-866-295-7274  
F 615-313-8414  
TTY 1-877-434-7598  
www.aarp.org/tn

February 15, 2008

Received

FEB 20 2008

Bureau of TennCare

cc: D. Gordon  
M. Wilson  
J. Ellis

Mr. Darin J. Gordon  
Deputy Commissioner  
Bureau of TennCare  
310 Great Circle Road  
Nashville, Tennessee 37243

Dear Darin:

Thank you, Patti Killingsworth and Marilyn Wilson for meeting with AARP Tennessee to discuss Governor Bredesen's plan to restructure the long-term care system in the state. As you know, this has been a priority issue for us for many years and the governor's announcement of his intention to make this the year that the state rebalances its long-term care system was applauded by AARP members all across the state.

We are pleased that you have reviewed AARP's 2006 report, *Improving Long-Term Care Services in Tennessee*, and believe that your draft proposal is consistent with the AARP recommendations regarding "best practice" approaches to long-term care. As you suggested in your letter of February 7, we are providing additional comments regarding "key principles" of a new long-term care system. These principles are based on the AARP Policy Book adopted by our national board of directors and the 2006 report.

We look forward to seeing the draft proposal and to working with the governor and you to bring our shared vision of a new long-term care system to reality. Under the principles we are putting forth, we believe we will be able to stand with the administration and support the legislative efforts in the General Assembly.

We recognize that the legislative process is only the beginning of the effort that will lead to the expansion of long-term care choices for Tennesseans. AARP Tennessee stands ready to assist in all phases of this effort with our leadership, membership, and expertise.

Thank you again for your work in this arena. We are truly excited about the opportunity this offers to improve options for older individuals and their families and care for adults with physical disabilities in Tennessee. We look forward to continuing to work with you to make rebalancing the system a reality.

Rebecca Kelly  
State Director  
AARP Tennessee

cc: Patti Killingsworth, Chief of Long-Term Care

Erik D. Olsen, President  
William D. Novelli, Chief Executive Officer

## AARP Tennessee Principles for Expansion of Home and Community Based Services

### Access

The public should have access to timely, easy-to-understand information about their options for receiving long term services and supports, including home and community based services (HCBS). This should include a diversion program for recent nursing home residents to identify HCBS options that may be preferred and appropriate.

A uniform assessment tool should be used focused on the need for assistance with activities of daily living, as well as medical needs, and should be used for assessing eligibility for both HCBS and nursing home services.

Eligibility for HCBS should be prompt, and should include presumptive eligibility based on an initial assessment where necessary to commence preferred HCBS and avoid unnecessary entry into a nursing home.

### Financing

There should be a global budget for long term supports and services, including HCBS and nursing home services, and it should be flexible enough so the needs and desires of the individual drives the decision where services will be provided rather than the place funding happens to be available.

### Services

Consumers have the right to decide on and direct the long term support services they receive, unless it is determined they are unable to do so.

The design and delivery of all services should promote independence, choice, dignity, autonomy and privacy.

An adequate menu of HCBS services should be available, as well as enough providers to deliver those services, including personal care services to assist with activities of daily living including bathing, dressing, eating, and mobility.

Support should be provided to family caregivers including respite services, caregiver training and education, and compensation for delivering services, where appropriate.

Home care workers should receive adequate compensation to assure the recruitment and retention of a workforce capable and qualified to provide HCBS services.

Nursing home residents should have access to a nursing home transition program under which they can receive an independent evaluation to determine whether they can safely receive necessary services in a home or community setting, and are provided information about their HCBS options.

#### Housing and Transportation

HCBS should be available in a range of settings including residences, supportive housing, and adult day centers

Reasonable home modifications should be available to enable persons to remain in their homes and receive appropriate services.

Affordable, accessible transportation should be available to enable persons receiving HCBS to remain active members of their communities.

#### Quality

Adequate structures should be in place, and should be adequately funded, to monitor the quality of long term support services, including HCBS and nursing home services.

Quality measures should include both system performance indicators and customer perceptions of quality.

The vulnerable population requiring long term support services should have strong consumer protections, and should have a private right of action to enforce their rights.

Ensuring individuals have a broad choice of providers is an important driver of quality, as this gives providers a strong incentive to compete for customers.